



PATENT
Attorney Docket No. U0003/7005

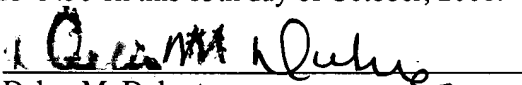
COGC

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

PATENTEE(S): John McCune Anderson CONFIRMATION NO.: 3594
PATENT NO.: 7,110,812 GROUP NO.: 3762
ISSUE DATE: September 19, 2006 EXAMINER: Manuel, George C.
SERIAL NO. 09/980,971
FILING DATE: April 12, 2002
TITLE: CARDIAC DEFIBRILLATION

CERTIFICATE OF FIRST CLASS MAILING UNDER 37 C.F.R. 1.8

I hereby certify that this correspondence, and any document(s) referred to as enclosed herein, is/are being deposited with the United States Postal Service as first class mail, postage prepaid, in an envelope addressed to the ATTN: Certificate of Correction Branch, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this 13th day of October, 2006.


Debra M. Doherty

ATTN: Certificate of Correction Branch
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Submitted herewith are:

Transmittal Form (1 pg.);

Fee Transmittal Form (1 pg.);

Request For Certificate Of Correction (2 pgs.) with Exhibit A (1 pg.) and Exhibit B (1 pg.);

Certificate of Correction in duplicate (1 pg.);

Check in the amount of \$100; and

Return Receipt Postcard.

Certificate
OCT 20 2006
of Correction

OCT 20 2006



TRANSMITTAL FORM

Application Serial Number	09/980,971
Filing Date	April 12, 2002
First Named Inventor	John McCune Anderson
Group Art Unit	3762
Examiner Name	Manuel, George C.
Attorney Docket No.	U0003/7005
Patent No.	7,110,812
Issue Date	September 19, 2006

ENCLOSURES (check all that apply)

- | | | |
|--|--|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form
PTOL-85 Part B
<input checked="" type="checkbox"/> Check Attached
<input checked="" type="checkbox"/> Copy of Fee Transmittal Form

<input type="checkbox"/> Amendment/Response

<input type="checkbox"/> Preliminary
<input type="checkbox"/> After Final
<input type="checkbox"/> Affidavits/declaration(s)
<input type="checkbox"/> Letter to Official
Draftsperson
including Drawings
[Total Sheets _____]

<input type="checkbox"/> Petition for Extension of Time

<input type="checkbox"/> Information Disclosure Statement
<input type="checkbox"/> Form PTO-1449
<input type="checkbox"/> Copies of IDS Citations

<input type="checkbox"/> Certified Copy of Priority
Document(s)

<input type="checkbox"/> Sequence Listing submission
<input type="checkbox"/> Paper Copy/CD
<input type="checkbox"/> Computer Readable Copy
<input type="checkbox"/> Statement verifying identity of
above | <input type="checkbox"/> Copy of Notice to File Missing Parts of
Application

<input type="checkbox"/> Formal Drawings

<input type="checkbox"/> Request For Continued Examination
(RCE) Transmittal

<input type="checkbox"/> Power of Attorney
(Revocation of Prior Powers)

<input type="checkbox"/> Terminal Disclaimer

<input type="checkbox"/> Executed Declaration and Power of
Attorney for Utility or Design Patent
Application

<input type="checkbox"/> Small Entity Statement

<input type="checkbox"/> CD(s) for large table or computer
program

<input type="checkbox"/> Amendment After Allowance

<input checked="" type="checkbox"/> Request for Certificate of Correction
<input checked="" type="checkbox"/> Certificate of Correction (in
duplicate) | <input type="checkbox"/> Notice of Appeal to Board of Patent
Appeals and Interferences

<input type="checkbox"/> Appeal Brief (in triplicate)

<input type="checkbox"/> Status Inquiry

<input checked="" type="checkbox"/> Return Receipt Postcard

<input checked="" type="checkbox"/> Certificate of First Class Mailing under
37 C.F.R. 1.8

<input type="checkbox"/> Certificate of Facsimile
Transmission under 37 C.F.R. 1.8

<input checked="" type="checkbox"/> Additional Enclosure(s)
(please identify below)
"Exhibit A" - Copy of P. 3 of Amendment
dated October 21, 2004.
"Exhibit B" - Copy of P. 2 of Amendment
and Reply to December 19, 2005 Office
Action |
|--|--|--|

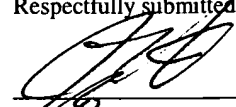
CORRESPONDENCE ADDRESS

Direct all correspondence to: Patent Administrator
Kirkpatrick & Lockhart Nicholson
Graham LLP
State Street Financial Center
One Lincoln Street
Boston, MA 02111-2950
Tel. No.: (617) 261-3100
Fax No.: (617) 261-3175

SIGNATURE BLOCK

Date: October 13, 2006
Reg. No. 42,890
Tel. No.: (617) 261-3239
Fax No.: (617) 261-3175

Respectfully submitted,


Joyce C. Hersh
Attorney for Applicant(s)
Kirkpatrick & Lockhart Nicholson
Graham LLP
State Street Financial Center
One Lincoln Street
Boston, MA 02111-2950

OCT 20 2006



THE UNITED STATES PATENT AND TRADEMARK OFFICE

INVENTOR(S): John McCune Anderson; Noel Evans
PATENT NO: 7,110,812
ISSUE DATE: September 19, 2006
SERIAL NO.: 09/980,971
FILING DATE: April 12, 2002
TITLE: Cardiac Defibrillation

ATTN: Certificate of Correction Branch
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

REQUEST FOR CERTIFICATE OF CORRECTION

Dear Sir:

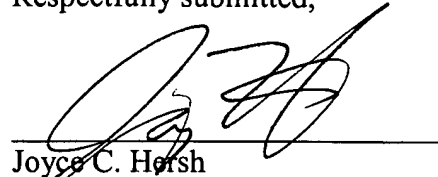
The Assignee of record of the above-identified patent, UUTech Limited, by virtue of an assignment recorded in the U.S. Patent and Trademark Office (USPTO) on April 12, 2002, at Reel No. 012801, Frame No. 0859, hereby requests that a Certificate of Correction be issued for U.S. Patent No. 7,110,812 under 35 U.S.C. § 255 and 37 C.F.R. § 1.323.

The Assignee respectfully requests that the correction which appears on the enclosed Certificate of Correction issue. More specifically, as issued, claim 7 reads "apparatus according claim 1" rather than "apparatus according to claim 1." Claim 7 as issued was numbered as claim 6 in the amendments. The Assignee inadvertently deleted the word "to" in claim 6 in its Amendment dated October 21, 2004, and subsequently omitted the word "to" in the final version of the amended claim 6 in its Amendments and Reply to December 19, 2005 Office Action. For the convenience of the Patent Office, copies of the relevant pages of the Amendment dated October 21, 2004 and Amendments and Reply to December 19, 2005 Office Action both highlighting claim 6 are attached as "Exhibit A" and "Exhibit B" respectively.

OCT 20 2006

The Assignee is enclosing a check for \$100 in pursuant to 37 C.F.R. §1.20(a) for this Request for a Certificate of Correction as the error apparently arose due to Assignee's mistake. If any fee is further due for this submission, the Director is authorized to charge Attorney's Deposit Account No. 50-1721. The Patent Office is invited to call the undersigned attorney with any questions concerning the submission of this paper.

Respectfully submitted,



Joyce C. Horsh
Attorney for the Applicant
Kirkpatrick & Lockhart Nicholson
Graham LLP
State Street Financial Center
One Lincoln Street
Boston, MA 02111-2950

Date: October 13, 2006
Reg. No.: 42,890

Tel. No.: (617) 261-3239
Fax No.: (617) 261-3175

OCT 20 2006

COPY

6. (currently amended) An apparatus according to ~~any preceding claim~~ Claim 1, in which the external and implantable circuits include impedance matching components to achieve a high degree of tuning.
7. (original) An apparatus according to Claim 6, in which the inductive coupling is tuned to resonance.
8. (currently amended) An apparatus according to Claim ~~8~~ 7 in which the inductive coupling is tuned to resonance by use of series resonance in the external circuit and parallel resonance in the implantable circuit.
9. (currently amended) An apparatus according to ~~any preceding claim~~ Claim 1, in which the implantable circuit contains only passive components.
10. (original) A method of cardiac defibrillation which comprises transmitting pulses of controlled shape and energy transdermally by high frequency magnetic induction to a substantially passive implanted circuit which includes electrodes implanted in the heart.
11. (original) The method of Claim 10, in which the electrodes are implanted to provide atrial defibrillation.
12. (new) The apparatus according to Claim 2 wherein said radio frequency is about 7 MHZ.

OCT 20 2006

COPY

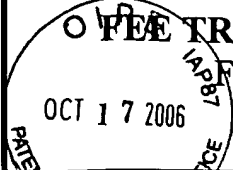
AMENDMENTS TO THE CLAIMS

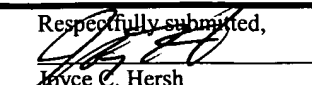
This listing of claims will replace all prior versions, and listings, of claims in the application.

What is claimed:

1. (currently amended) An apparatus for cardiac defibrillation which comprises an external circuit and an implantable circuit; the external circuit including an induction transmitting coil and signal generating means for applying radio frequency pulses of predetermined shape to the transmitting coil; the radio frequency pulses having energy levels such as to cause defibrillation; the implantable circuit including an induction receiving coil for receiving the defibrillation radio frequency pulses when the two coils are in proximity, and a rectification circuit having an input connected to the receiving coil and an output driving electrodes implantable in the heart, to transfer defibrillation signals to the heart.
2. (previously presented) An apparatus according to Claim 1, for use in atrial defibrillation, in which the power transmitted per pulse is less than about 5J and the radio frequency is in the range 3-30 MHz.
3. (original) An apparatus according to Claim 1 or Claim 2, in which the signal generating means comprises a radio frequency generator switched or gated under the control of a pulse generation and shaping means which in turn is responsive to an ecg synchronisation signal.
4. (original) An apparatus according to Claim 3, in which the ecg synchronisation signal is provided via a telemetry transmitter implanted in the patient.
5. (previously presented) An apparatus according to Claim 1, in which the external circuit further includes a telephony link by which the ecg may be transmitted to, and/or the apparatus controlled from, a remote location.
6. (previously presented) An apparatus according Claim 1, in which the external and implantable circuits include impedance matching components to achieve a high degree of tuning.

OCT 20 2006

 FEE TRANSMITTAL OCT 17 2006 TRADEMARK SERVICE	Complete if Known	
	Application Serial Number	09/980,971
	Filing Date	April 12, 2002
	First Named Inventor	John McCune Anderson
	Group Art Unit	3762
	Examiner Name	George C. Manuel
Attorney Docket No.	U0003/7005	

METHOD OF PAYMENT	FEE CALCULATION (continued)																																																																																												
<p>1. <input checked="" type="checkbox"/> Payment Enclosed: <input checked="" type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Other</p> <p>2. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to credit or charge any fee indicated below for this submission to Deposit Account No. 50-1721. <input type="checkbox"/> Required Fees (copy of this sheet enclosed). <input checked="" type="checkbox"/> Additional fee required under 37 CFR 1.16 and 1.17. <input type="checkbox"/> Overpayment Credit.</p> <p>3. <input checked="" type="checkbox"/> Applicant claims small entity status.</p>	<p>3. ADDITIONAL FEES</p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Large Entity Fee (\$)</th> <th style="text-align: left;">Small Entity Fee (\$)</th> <th style="text-align: left;">Fee Description</th> <th style="text-align: left;">Fee Paid</th> </tr> </thead> <tbody> <tr><td>130</td><td>65</td><td>Surcharge - late filing fee or oath</td><td></td></tr> <tr><td>50</td><td>25</td><td>Surcharge - late provisional filing fee or cover sheet</td><td></td></tr> <tr><td>130</td><td>130</td><td>Non-English specification</td><td></td></tr> <tr><td>2,520</td><td>2,520</td><td>Request for ex parte reexamination</td><td></td></tr> <tr><td>120</td><td>60</td><td>Extension for reply within first month</td><td></td></tr> <tr><td>450</td><td>225</td><td>Extension for reply within second month</td><td></td></tr> <tr><td>1020</td><td>510</td><td>Extension for reply within third month</td><td></td></tr> <tr><td>1590</td><td>795</td><td>Extension for reply within fourth month</td><td></td></tr> <tr><td>2160</td><td>1080</td><td>Extension for reply within fifth month</td><td></td></tr> <tr><td>500</td><td>250</td><td>Notice of Appeal</td><td></td></tr> <tr><td>500</td><td>250</td><td>Filing a brief in support of an appeal</td><td></td></tr> <tr><td>1000</td><td>500</td><td>Request for oral hearing</td><td></td></tr> <tr><td>400</td><td>400</td><td>Petitions to the Commissioner (Gp. I)</td><td></td></tr> <tr><td>200</td><td>200</td><td>Petitions to the Commissioner (Gp. II)</td><td></td></tr> <tr><td>130</td><td>130</td><td>Petitions to the Commissioner (Gp. III)</td><td></td></tr> <tr><td>180</td><td>180</td><td>Submission of Information Disclosure Statement</td><td></td></tr> <tr><td>790</td><td>395</td><td>Filing a submission after final rejection (37 CFR 1.129(a))</td><td></td></tr> <tr><td>790</td><td>395</td><td>For each additional invention to be examined (37 CFR 1.129(b))</td><td></td></tr> <tr><td>100</td><td>100</td><td>Certificate of Correction for applicant's error</td><td>100.00</td></tr> <tr><td>130</td><td>65</td><td>Submission of Terminal Disclaimer</td><td></td></tr> <tr><td colspan="2">Other fee (Specify)</td><td></td><td></td></tr> <tr><td colspan="2">Other fee (Specify)</td><td></td><td></td></tr> </tbody> </table> <p style="text-align: right;">SUBTOTAL (3) (\$) 100.00</p>	Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid	130	65	Surcharge - late filing fee or oath		50	25	Surcharge - late provisional filing fee or cover sheet		130	130	Non-English specification		2,520	2,520	Request for ex parte reexamination		120	60	Extension for reply within first month		450	225	Extension for reply within second month		1020	510	Extension for reply within third month		1590	795	Extension for reply within fourth month		2160	1080	Extension for reply within fifth month		500	250	Notice of Appeal		500	250	Filing a brief in support of an appeal		1000	500	Request for oral hearing		400	400	Petitions to the Commissioner (Gp. I)		200	200	Petitions to the Commissioner (Gp. II)		130	130	Petitions to the Commissioner (Gp. III)		180	180	Submission of Information Disclosure Statement		790	395	Filing a submission after final rejection (37 CFR 1.129(a))		790	395	For each additional invention to be examined (37 CFR 1.129(b))		100	100	Certificate of Correction for applicant's error	100.00	130	65	Submission of Terminal Disclaimer		Other fee (Specify)				Other fee (Specify)			
Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid																																																																																										
130	65	Surcharge - late filing fee or oath																																																																																											
50	25	Surcharge - late provisional filing fee or cover sheet																																																																																											
130	130	Non-English specification																																																																																											
2,520	2,520	Request for ex parte reexamination																																																																																											
120	60	Extension for reply within first month																																																																																											
450	225	Extension for reply within second month																																																																																											
1020	510	Extension for reply within third month																																																																																											
1590	795	Extension for reply within fourth month																																																																																											
2160	1080	Extension for reply within fifth month																																																																																											
500	250	Notice of Appeal																																																																																											
500	250	Filing a brief in support of an appeal																																																																																											
1000	500	Request for oral hearing																																																																																											
400	400	Petitions to the Commissioner (Gp. I)																																																																																											
200	200	Petitions to the Commissioner (Gp. II)																																																																																											
130	130	Petitions to the Commissioner (Gp. III)																																																																																											
180	180	Submission of Information Disclosure Statement																																																																																											
790	395	Filing a submission after final rejection (37 CFR 1.129(a))																																																																																											
790	395	For each additional invention to be examined (37 CFR 1.129(b))																																																																																											
100	100	Certificate of Correction for applicant's error	100.00																																																																																										
130	65	Submission of Terminal Disclaimer																																																																																											
Other fee (Specify)																																																																																													
Other fee (Specify)																																																																																													
<p style="text-align: center;">FEE CALCULATION</p> <p>1. FILING/SEARCH/EXAM/SIZE FEES</p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Large Entity Fee (\$)</th> <th style="text-align: left;">Fee Description</th> <th style="text-align: left;">Fee Paid</th> </tr> </thead> <tbody> <tr><td>300</td><td>Utility filing fee</td><td></td></tr> <tr><td>500</td><td>Utility search fee</td><td></td></tr> <tr><td>200</td><td>Utility exam fee</td><td></td></tr> <tr><td>250</td><td>Utility size fee (each add'l 50 pgs. over 100)</td><td></td></tr> <tr><td>200</td><td>Design filing fee</td><td></td></tr> <tr><td>100</td><td>Design search fee</td><td></td></tr> <tr><td>130</td><td>Design exam fee</td><td></td></tr> <tr><td>250</td><td>Design size fee (each add'l 50 pgs. over 100)</td><td></td></tr> </tbody> </table> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Total Claims</th> <th style="text-align: center;">Number Filed</th> <th style="text-align: center;">Number Extra</th> <th style="text-align: center;">Rate</th> <th style="text-align: center;">Amount</th> </tr> </thead> <tbody> <tr> <td></td> <td style="text-align: center;">- 20 =</td> <td></td> <td style="text-align: center;">x \$ 50.00 =</td> <td></td> </tr> <tr> <td>Independent Claims</td> <td style="text-align: center;">- 3 =</td> <td></td> <td style="text-align: center;">x \$200.00 =</td> <td></td> </tr> </tbody> </table> <p><input type="checkbox"/> Multiple Dependent Claim(s), if any \$360.00 =</p> <p style="text-align: right;">TOTAL: (\$)</p> <p style="text-align: right;">SMALL ENTITY DISCOUNT: (\$)</p> <p style="text-align: right;">SUBTOTAL (1) (\$)</p>	Large Entity Fee (\$)	Fee Description	Fee Paid	300	Utility filing fee		500	Utility search fee		200	Utility exam fee		250	Utility size fee (each add'l 50 pgs. over 100)		200	Design filing fee		100	Design search fee		130	Design exam fee		250	Design size fee (each add'l 50 pgs. over 100)		Total Claims	Number Filed	Number Extra	Rate	Amount		- 20 =		x \$ 50.00 =		Independent Claims	- 3 =		x \$200.00 =		<p>2. AMENDMENT CLAIM FEES</p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Claims Remaining After Amend.</th> <th style="text-align: left;">Highest No. Previously Paid For</th> <th style="text-align: left;">Present Extra</th> <th style="text-align: left;">Rate</th> <th style="text-align: left;">Fee Paid</th> </tr> </thead> <tbody> <tr> <td>Total</td> <td style="text-align: center;">-</td> <td style="text-align: center;">=</td> <td style="text-align: center;">x \$ 50.00 =</td> <td></td> </tr> <tr> <td>Indep.</td> <td style="text-align: center;">-</td> <td style="text-align: center;">=</td> <td style="text-align: center;">x \$200.00 =</td> <td></td> </tr> <tr> <td colspan="3"><input type="checkbox"/> First Presentation of Multiple Dep. Claim</td> <td style="text-align: center;">+ \$360.00 =</td> <td></td> </tr> <tr> <td colspan="4" style="text-align: right;">TOTAL:</td> <td style="text-align: center;">(\$)</td> </tr> <tr> <td colspan="4" style="text-align: right;">SMALL ENTITY DISCOUNT:</td> <td style="text-align: center;">(\$)</td> </tr> <tr> <td colspan="4" style="text-align: right;">SUBTOTAL (2)</td> <td style="text-align: center;">(\$)</td> </tr> </tbody> </table>	Claims Remaining After Amend.	Highest No. Previously Paid For	Present Extra	Rate	Fee Paid	Total	-	=	x \$ 50.00 =		Indep.	-	=	x \$200.00 =		<input type="checkbox"/> First Presentation of Multiple Dep. Claim			+ \$360.00 =		TOTAL:				(\$)	SMALL ENTITY DISCOUNT:				(\$)	SUBTOTAL (2)				(\$)															
Large Entity Fee (\$)	Fee Description	Fee Paid																																																																																											
300	Utility filing fee																																																																																												
500	Utility search fee																																																																																												
200	Utility exam fee																																																																																												
250	Utility size fee (each add'l 50 pgs. over 100)																																																																																												
200	Design filing fee																																																																																												
100	Design search fee																																																																																												
130	Design exam fee																																																																																												
250	Design size fee (each add'l 50 pgs. over 100)																																																																																												
Total Claims	Number Filed	Number Extra	Rate	Amount																																																																																									
	- 20 =		x \$ 50.00 =																																																																																										
Independent Claims	- 3 =		x \$200.00 =																																																																																										
Claims Remaining After Amend.	Highest No. Previously Paid For	Present Extra	Rate	Fee Paid																																																																																									
Total	-	=	x \$ 50.00 =																																																																																										
Indep.	-	=	x \$200.00 =																																																																																										
<input type="checkbox"/> First Presentation of Multiple Dep. Claim			+ \$360.00 =																																																																																										
TOTAL:				(\$)																																																																																									
SMALL ENTITY DISCOUNT:				(\$)																																																																																									
SUBTOTAL (2)				(\$)																																																																																									
<p style="text-align: center;">CORRESPONDENCE ADDRESS</p> <p>Direct all correspondence to:</p> <p style="margin-left: 40px;">Patent Administrator Kirkpatrick & Lockhart Nicholson Graham LLP State Street Financial Center One Lincoln Street Boston, MA 02111-2950 Tel. No.: (617) 261-3100 Fax No.: (617) 261-3175</p>	<p style="text-align: center;">SIGNATURE BLOCK</p> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p>Date: October 13, 2006 Reg. No.: 42,890 Tel. No.: (617) 261-3100 Fax No.: (617) 261-3175</p> </div> <div style="width: 50%; text-align: center;"> <p>Respectfully submitted,</p>  Joyce C. Hersh Attorney for the Applicants Kirkpatrick & Lockhart Nicholson Graham LLP State Street Financial Center One Lincoln Street Boston, MA 02111-2950 </div> </div>																																																																																												

UNITED STATES PATENT AND TRADEMARK OFFICE CERTIFICATE OF CORRECTION

PATENT NO : 7,110,812

Page 1 of 1

DATED : September 19, 2006

INVENTOR(S) : Anderson et al

It is certified that error appears in the above-identified patent and that said Letters Patent are hereby corrected as shown below:

In claim 7, line 1, the phrase reading "An apparatus according claim 1" should read --An apparatus according to claim 1--.

MAILING ADDRESS OF SENDER (Please do not use customer number below):

Patent Administrator
Kirkpatrick & Lockhart Nicholson Graham LLP
One Lincoln Street Boston, MA 02111-2950

This collection of information is required by 37 CFR 1.322, 1.323, and 1.324. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 1.0 hour to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Attention Certificate of Corrections Branch, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

OCT 20 2006

UNITED STATES PATENT AND TRADEMARK OFFICE CERTIFICATE OF CORRECTION

PATENT NO : 7,110,812

Page 1 of 1

DATED : September 19, 2006

INVENTOR(S) : Anderson et al

It is certified that error appears in the above-identified patent and that said Letters Patent are hereby corrected as shown below:

In claim 7, line 1, the phrase reading "An apparatus according claim 1" should read --An apparatus according to claim 1--.

MAILING ADDRESS OF SENDER (Please do not use customer number below):

Patent Administrator
Kirkpatrick & Lockhart Nicholson Graham LLP
One Lincoln Street Boston, MA 02111-2950

This collection of information is required by 37 CFR 1.322, 1.323, and 1.324. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 1.0 hour to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Attention Certificate of Corrections Branch, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

OCT 20 2006